PATENT APPLICATION FEE DETERMINATION RECOR

Application or Docket Number 10/527798

| <u>-</u> | | | | | | | | | | • | _ | |
|--|--|--|---|---------------------------------------|-----------------------------------|--------------------------------------|------------|---------------------|---|------------|---------------------|------------------------|
| CLAIMS AS FILED - PART I | | | | | | | | SMALL EN | ШΥ | ^^ | | R THẠN |
| L | | • | (Cotumn | 1) | | (Column 2) | ٦. | 1115 | | OR - | SMALL | ENTITY |
| U.: | S. NATIONAL | STAGE FEES | | | | | | RATE | FEE | | RATE | FEE |
| BASIC FEE | | | SMALL ENT. = | LAR | GE ENT. = \$ 300 | | BASIC FEE | | OR | BASIC FEE | 300 | |
| EXAMINATION FEE | | | Satisfies PCT Artic | | ther situations = \$ 100 / \$ 200 | | EXAM. FEE | | | EXAM FEE | 100 | |
| SEARCH FEE | | | U.S. is ISA = \$50 / \$100 ALL other countries = \$200 / \$400 | | | ther situations = \$ 250 / \$ 500 | | SEARCH FEE | | 1 | SEARCH FEE | 100 |
| FEE FOR EXTRA SPEC. PGS. | | | minus 100 = | | | / 50 = | | X \$ 125 = | | 1 | X \$ 250 = | |
| TOTAL CHARGEABLE CLAIMS | | | 26 minus 20 = | | | -6 | | X \$ 25 = | | OR | X \$ 50 = | 300 |
| INDEPENDENT CLAIMS | | | 2 min | | | | X \$ 100 = | | OR | X \$ 200 = | | |
| MUI | LTIPLE DEPEN | IDENT CLAIM PR | ESÉNT | SENT | | | | +\$ 180 = | | OR | +\$360= | |
| * If the difference in column 1 is less than zero, enter "0" in column 2 | | | | | | | | TOTAL | | OR | TOTAL | 800 |
| CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3) | | | | | | | | SMALL E | OTHER THAN SMALL ENTITY OR SMALL ENTITY | | | |
| MTA | | CLAIMS REMAINING · AFTER AMENDMENT | | HIGHE NUMB PREVIOU PAID F | er USLY | PRESENT EXTRA | | RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE |
| AMENDMENT | Total | . 26 | Minus . | 24 | 0 | = | | X \$ 25 = | | OR | X \$ 50 = | |
| AME | Independent | · 2 | Minus ** | · 3 | | = | | X \$ 100 = | | OR | X \$ 200 = | |
| | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | | | | +\$ 180= | · | OR | + \$ 360 = | |
| | | | | | | | | TOTAL ADDIT. FEE | | OR | TOTAL ADDIT. FEE | |
| | •• | (Column 1) | | (Column | 12) | (Column 3) | | • | | | | Y |
| MENT 8 | | CLAIMS REMAINING AFTER AMENDMENT | · | HIGHES NUMBE PREVIOU PAID FO | ST IR SLY | PRESENT EXTRA | | RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE |
| QME | Total | • | Minus ** | | | = | | X \$ 25 = | | OR | X \$ 50 = | |
| AMEND | Independent | • | Minus ** | ·• | | = | | X \$ 100 = | | OR | X \$ 200 = | |
| | FIRST PRES | ENTATION OF M | ULTIPLE DEPENC | DENT CL | ALM | | | +\$ 180 = | | OR | + \$ 360 = | |
| | | • | | | | | • | FEE | | OR T | TOTAL ADDIT. FEE | |
| ••• | f the "Highest Nur f the "Highest Nur | mber Previously Paid mber Previously Paid | entry in column 2, w I For IN THIS SPACI I For IN THIS SPACI For (Total or Indeper | E is less t E is less t | nan 20 nan 3, | ', enter "20". enter "3". | In the | appropriate box | in cotumn 1. | | • | |

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